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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/900,569	07/05/2001	Tetsuo Ogino	0015049/279(128)	4089

7590 09/13/2005

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EXAMINER

NGUYEN, CINDY

ART UNIT	PAPER NUMBER
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2161

DATE MAILED: 09/13/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No. 09/900,569	Applicant(s) OGINO ET AL.	
	Examiner Cindy Nguyen	Art Unit 2171	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
- Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 10 June 2005.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☐ Claim(s) 77-87 and 89-94 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☐ Claim(s) 77-87, 89-94 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☒ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on 04 September 2001 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
- 11) ☐ The proposed drawing correction filed on _____ is: a) ☐ approved b) ☐ disapproved by the Examiner.
If approved, corrected drawings are required in reply to this Office action.
- 12) ☐ The oath or declaration is objected to by the Examiner.

Priority under 35 U.S.C. §§ 119 and 120

- 13) ☒ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☒ Certified copies of the priority documents have been received.
2. ☐ Certified copies of the priority documents have been received in Application No. _____.
3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).
* See the attached detailed Office action for a list of the certified copies not received.
- 14) ☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. § 119(e) (to a provisional application).
a) ☐ The translation of the foreign language provisional application has been received.
- 15) ☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. §§ 120 and/or 121.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413) Paper No(s). _____ |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 5) <input type="checkbox"/> Notice of Informal Patent Application (PTO-152) |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO-1449) Paper No(s) _____ | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

This is in response to amendment filed 06/10/05.

Response to Arguments

Applicant's arguments have been considered but are moot in view of the new ground(s) of rejection.

1. Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

2. Claims 77-87, 89-94 are rejected under 35 U.S.C. 103(a) as being unpatentable over Tipirneni (US 6381029) in view of Barnes et al. (US 6912317) (Barnes).

Regarding claims 93 and 94, Tipirneni discloses: a network generally available to the public (100, fig. 1, Tipirneni);

a plurality of subscribers having imaging devices for producing medical images and connected to said network for transmitting through said network said produced medical images for storage (col. 3, lines 7-62 and col. 6, lines 58 to col. 7, lines 7, Tipirneni);

wherein each of said plurality of subscribers has a registration contract and /or access contract whereby the registration contract entitles the holder thereof to transmit

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through said network said medical images produced by imaging devices of the subscriber to a single server for storage, and whereby the access contract entitles the holder thereof to receive through said network said medical images stored in said single server (col. 6, lines 58 to col. 7, lines 7, Tipirneni);

wherein said medical images are associated with at least one image selected from the group of imaging devices producing MRI, X-ray CT, Ultrasound, PET, digitalized X-ray and CR (col. 3, lines 37-62, Tipirneni); and

said single server, being separate from and used commonly by said plurality of subscribers, and being connected to said network for servicing said plurality of subscribers upon signaling from said plurality of subscribers (100, 50, 150, 110, fig. 1) said single server comprising a database for storage of said medical images produced by said imaging devices of said plurality of subscribers and transmitted through said network upon signaling by said plurality of subscribers (16, fig. 2, Tipirneni);

means for checking and verifying legitimacy of said plurality of subscribers seeking to store said medical image in said database of said single server or seeking to access said medical images stored in said database of said single server (col. 6, lines 12-38, Tipirneni);

means for registering in said database said medical images produced by said imaging devices of said plurality of subscriber and transmitted through said network by ones of said plurality of subscribers having a registration contract upon signaling by said ones of said plurality of subscribers and upon checking and verifying legitimacy (col. 7, lines 30-65, Tipirneni);

means for accessing in said database said medical images registered therein by ones of said plurality of subscribers having an access contract upon signaling by said ones of said plurality of subscribers and upon checking and verifying legitimacy (col. 8, lines 31-62, Tipirneni);

wherein said storing being equivalent to said registering of medical images in said database (col. 5, lines 10-34, Tipirneni); means for compressing in data size said medical images when transmitted through said network (col. 5, lines 10-34, Tipirneni).

However, Tipirneni didn't disclose: for decompressing in data size said medical images to original data size when received through said network by a subscriber seeking access and means for producing a backup of medical images registered in said database. On the other hand, Barnes discloses: for decompressing in data size said medical images to original data size when received through said network by a subscriber seeking access (col. 3, lines 14-35, Barnes) and means for producing a backup of medical images registered in said database (col. 3, lines 36-57, Barnes). Therefore, at the time the invention was made, it would have been obvious to a person of ordinary skill in the art to include the steps for decompressing in data size said medical images to original data size when received through said network by a subscriber seeking access and means for producing a backup of medical images registered in said database in the system of Tipirneni as taught by Barnes. The motivation being enable the system have a designed processing image that make the image data available for decompression and review after transmitted process so the

user can view clearly the image and also provided the backup technique for backup and archiving for data management.

Regarding claim 77, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes disclose: wherein said plurality of subscribers comprises a hard copy device (100, fig. 1, Tipirneni) and wherein said at least one subscriber transmits format information including image identifier information to said hard copy device, wherein hard copy device receives delivery information through said images corresponding to said image identifier information through said network and the provides a hard copy of said medical images (col. 3, lines 63 to col. 4, lines 15, Tipirneni).

Regarding claim 78, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said plurality of subscribers comprise a software executing subscriber running medical software for transmission through said network to said single server (col. 4, lines 16-42, Tipirneni); and wherein said single server manages medical software and registers said medical software transmitted through said network by said at least one subscriber in said database and causes delivery of said medical software through said network to said software executing subscriber (col. 6, lines 12-38, Tipirneni).

Regarding claim 79, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said plurality of subscribers comprise two or more subscribers, each connected to said network (100, 150, 50 fig. 1, Tipirneni).

Regarding claim 80, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said plurality of subscribers comprises means for specifying types of image processing to be communicated through said network to said single server, (col. 3, lines 38-63, Tipirneni).

Regarding claim 81, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said single server comprises means for informing said at least one subscriber through said network of type of image processing to be applied (110, fig. 1, Tipirneni).

Regarding claim 88, all the limitations of this claim have been noted in the rejection of claims 76 and 80 and 81 above. It is therefore rejected as set forth above.

Regarding claim 82, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said single server comprises means for establishing communication with said at least one subscriber when image processing is completed (110, 100, 50, 150, fig 1, Tipirneni); and means for transmitting through said network said medical images subjected to said image processing to said at least one subscriber (col. 3, lines 38-62, Tipirneni).

Regarding claim 83, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said plurality of subscribers comprise means for transmitting through said network to said server, a request for medical images subjected to image processing (col. 3, lines 38-62, Tipirneni); and means for receiving said medical image from said single server through said network (col. 5, lines 10-34, Tipirneni).

Regarding claim 84, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said single server comprises means for storing each medical image in at least one form before image processing (as compressed)(col. 5, lines 10-34, Tipirneni) and means for storing each medical image in at least one form (decompressed) after said image processing (col. 3, lines 14-35, Barnes).

Regarding claim 85, all the limitations of this claim have been noted in the rejection of claim 83 above. In addition,, Tipirneni/Barnes discloses: wherein said request is for only part or all of said medical image and wherein said part or all of said medical image are sent through said network to said plurality of subscribers (col. 5, lines 10-34, Tipirneni).

Regarding claim 86, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes discloses: wherein said single server comprises means for polling said plurality of subscribers through said network to collect medical images before image processing (col. 6, lines 12-38, Tipirneni).

Regarding claim 87, all the limitations of this claim have been noted in the rejection of claim 93 above. In addition, Tipirneni/Barnes/Tanaka discloses: wherein said single server comprises means for sending through said network to a delivery destination imaging conditions for said medical images (col. 6, lines 12-38, Tipirneni).

Regarding claim 89, all the limitations of this claim have been noted in the rejection of claim 94 above. In addition, Tipirneni/Barnes discloses: wherein one subscriber requests delivery of said medical images and comprises the further steps of requesting identifier information by said single server through said network from said one subscriber (col. 7, lines 30-65, Tipirneni) reading medical images from said database; sending each medical image from said single server through said network to said one subscriber and display said medical images by said one subscriber (col. 8, lines 31-62, Tipirneni).

Regarding claim 90, all the limitations of this claim have been noted in the rejection of claims 89 and 94 above. In addition, Tipirneni/Barnes discloses: wherein said one subscriber requests through said network of said single server registration of said medical images and comprising the further steps of requesting imaging conditions by said single server to said one subscriber or by said one subscriber to said single server through said network (col. 7, lines 5-17, Tipirneni);

Sending said imaging conditions by said one subscriber to said single server through said network or by said single server to said one subscriber through said network (col. 7, lines 5-17, Tipirneni);

Said single server registering said medical images according to imaging conditions in said database (col. 6 lines 12-37, Tipirneni).

Regarding claim 91, all the limitations of this claim have been noted in the rejection of claims 76, 89 and 94 above. It is therefore rejected as set forth above.

Regarding claim 92, all the limitations of this claim have been noted in the rejection of claim 91 above. In addition, Tipirneni/Barnes discloses: wherein said single server further sends through said network to said one subscriber request for identification information and said one subscriber sends such identification information to said single server through said network, wherein said single server reads medical images from said database and processes said medical images prior to sending results thereof to said one subscriber through said network (col. 7, lines 31 to col. 8, lines 62, Tipirneni).

Conclusion

Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire **THREE MONTHS** from the mailing date of this action. In the event a first reply is filed within **TWO MONTHS** of the mailing date of this final action and the advisory action is not mailed until after the end of the **THREE-MONTH** shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than **SIX MONTHS** from the date of this final action.

The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

Sloane (U.S 5619991). Delivery of medical services using electronic data communications.

Barnes et al. (U.S 5581460). Medical diagnostic report forming apparatus capable of attaching image data on report.

3. Contact Information


Any inquiry concerning this communication or earlier communications from the examiner should be directed to Cindy Nguyen whose telephone number is 703-305-4698. The examiner can normally be reached on M-F: 8:00-5:00.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Safet Metjahic can be reached on 703-308-1436. The fax phone numbers for the organization where this application or proceeding is assigned are 703-746-7239 for regular communications and 703-746-7240 for After Final communications.

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is 703-305-3900.



Cindy Nguyen
August 23, 2005


FRANTZ COBY
PRIMARY EXAMINER